



Information Bulletin for Primary Care Network Providers



January 2005

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PCN BULLETINS BY TYPE OF SERVICE

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Notice: Current PCN Manual On-Line

The current Utah Primary Care Network Provider Manual is on-line at <http://health.utah.gov/medicaid/pdfs/pcn.pdf>. Providers can obtain a copy of an updated page, or the entire PCN Manual, on the web site or by contacting Medicaid Information. The revision date of each page is at the top of the page. A change is typically marked in the left margin of the page with a vertical line.

There is a link to the PCN Manual on the Medicaid Provider's web site:
<http://health.utah.gov/medicaid/provhtml/provider.html>. The link is at the bottom of the Provider's web page.

This bulletin is available in editions for people with disabilities.

**Call Medicaid Information:
538-6155 or toll free 1-800-662-9651**

PCN web site: <http://health.utah.gov/pcn>
PCN Information
- Salt Lake City area, call 538-6155.
- In Utah, Idaho, Wyoming, Colorado, New Mexico,
Arizona and Nevada, call toll-free 1-800-662-9651.
- From other states, call 1-801-538-6155.

Medicaid web site: <http://health.utah.gov/medicaid>
Requesting a publication?
Send a Publication Request Form.
- by FAX: 1-801-536-0476
- by mail to: Division Of Health Care Financing
Box 143106, Salt Lake City UT 84114-3106

05 - 26 Billing Issues Update for Review

Code 87804 QW Influenza should be billed for influenza screening. Codes 87899 QW and 87449 QW should no longer be used for rapid influenza screening.

Code 82274 was recently approved through CLIA with the QW modifier. For occult blood in stool, the code 82270 should be used. Code 82274 remains non-covered in Medicaid and PCN.

When the codes 88142, 88143, 88174, and 88175 are billed, only one of the four codes will be paid.

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05 - 27 2005 CPT Covered Codes

82045	Albumin; ischemia modified
86064	B cells; total count
86379	Natural killer (NK) cells; total count
88174	Cytopathology, cervical or vaginal, automated thin layer preparation, screening by automated system, under physician supervision
88175	... with screening by automated system and manual re-screening, under physician supervision
88184	Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only first marker
88185	...each additional marker (add-on)
88187	Flow cytometry, interpretation; 2 to 8 markers
88188	... 9 to 15 markers
88189	... 16 or more markers

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05 - 28 Diagnosis Codes Covered for Emergency Only Client

066.41	West Nile Fever with encephalitis
070.71	Unspecified viral hepatitis C with hepatic coma
453.40	Venous embolism and thrombosis of unspecified deep vessels of lower extremity
453.41	Venous embolism and thrombosis of deep vessels of proximal extremity
453.42	Venous embolism and thrombosis of deep vessels of distal lower extremity

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05 - 29 Diabetes Self-Management Training

CMS has provided approval to add the pharmacist as a provider type to provide diabetes self-management training. To receive Medicaid approval as a Diabetes Self-Management Program, a minimum of two of the three provider types are required. All three provider types (pharmacist, nurse, and dietician) must be certified diabetes educators or have completed a recent course in diabetes consisting of a minimum of 24 hours of approved continuing diabetes specific education covering the 15 core content areas recommended by the ADA in order to receive approval as an instructor in the program through the Utah Department of Health, Bureau of Diabetes. After completion of the original 24 hours, instructors must complete a minimum of 6 hours of continuing education each year. Proof of Utah State license and certification of diabetic specific education must be submitted by each of the instructors to Medicaid Operations to obtain a provider number as a program group practice.

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